

Office of Statewide Health Planning and Development  
Healthcare Workforce and Community Development Division  
Health Careers Training Program

HEALTH CAREERS TRAINING PROGRAM  
MINI-GRANTS

Request for Application (RFA) 06-7013

**State of California**



**April 4, 2007**

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**1. Office of Statewide Health Planning and Development, Healthcare Workforce and Community Development Division, Health Careers Training Program Mission:**

- A. The State of California (State), Office of Statewide Health Planning Department (OSHPD), through the administration of the Healthcare Workforce and Community Development Division (HWCDD), works toward increasing and diversifying a healthcare workforce that reflects the State's population. HWCDD Health Careers Training Program (HCTP) works to increase the numbers of underrepresented and economically/educationally disadvantaged students through reinforcement of the skill sets needed to successfully complete a health professional education. Combining the principles of educational partnerships, community service, and workforce preparation into a continuum of healthcare and social responsibility strengthens California overall. The HWCDD has \$105,000.00 available to award multiple Contracts to programs that encourage diversity in the health professions.
- B. The intent of these Contracts is to strengthen the educational and social foundations, through direct and indirect program support, for underrepresented students to build on as they pursue a career in health. Successful applicants will demonstrate the principles of educational partnership, community support, and workforce preparation in their application. Pipeline, undergraduate, and post-baccalaureate activities designed to introduce, encourage, or reinforce healthcare service to underrepresented students could include (but are not limited to):
1. Academic preparation and support such as high school mentoring and tutoring programs, health professional career development counseling and advising, or Medical College Admissions Testing (MCAT), Dental Admissions Testing (DAT) or Licensing Board exam.
  2. Community service programs that combine medical issues and health careers information with volunteerism in local health centers.
  3. Health career conferences or workshops designed to provide students information on the academic survival skills needed for enrollment and completion of health profession programs.
  4. Case management to fund the supportive services of students or programs lacking resources and enhances academic preparation.

**2. HWCDD/HCTP Contracting Objectives**

Chapter 434, Statutes of 1981 (Health and Safety Code Section 127885 et seq.) and the 1985-86 Governor's Budget authorized OSHPD to begin a contracting program to facilitate the training of underrepresented individuals for health professions needed in underserved areas of the State. Applicants strive to increase the number of economically/educationally disadvantaged students who are recruited, admitted, and graduated from California health professional schools. Applicants are required to do outreach and recruitment in rural and other medically underserved areas whenever possible.

**3. Eligible Student Participants**

The HCTP activities are open to all economically/educationally disadvantaged students, regardless of race, gender, or ethnicity. However, due to the large percentage of African-American, Latino/Hispanic, Native American, or Southeast Asian students who are under-represented in the health professions, examples of specific outreach and recruitment efforts (such as mailing lists to student organizations, list serves, etc.) for these populations must be included. Applicants will be required to provide evidence of efforts to recruit from these groups.

#### **4. Proposal/Application Strategy**

- A. Applicants should focus their proposals around one or more of the program award categories. Proposals that are most consistent with the HWCDD/HCTP Mission and Contract Objectives will be considered most competitive.
- B. This Request for Application (RFA) and subsequent awards of Contracts are limited to the availability of funds from fiscal year 2006/07 with specific approval for the budgetary line item to fund these Contracts. This is a one-time Contract opportunity. There is no implied or expressed guarantee of subsequent funding after the initial Contract award in 2007.

#### **5. Application Period Duration**

The RFA Application period is April 4, 2007 through May 29, 2007 at 5:00 p.m. For assistance (clarification of requirements, definition of terms, etc.) contact HCTP staff at (916) 657-2607 or by e-mail at: [fborges@oshpd.state.ca.us](mailto:fborges@oshpd.state.ca.us).

## 6. Award Categories

### A. Academic Preparation and Support

#### 1. Category description:

Applicants will create academic preparation and support programs such as high school mentoring and tutoring programs, health professional career development counseling and advising, MCAT, DAT, or Licensing Board exam preparation. Any healthcare profession education or certification program with a demonstrated need for assistance in mastering the prerequisites, maintaining subject proficiency, or preparing for advanced education or licensure is eligible to compete. Time management, tutoring and mentoring projects, study and research skills, and testing techniques that enhance academic achievement and success are also eligible.

#### 2. Applications will be evaluated in accordance with the following guidelines:

- A. Demographics (Do participants reflect local populations proportionately?)
- B. Minimum of 30 enrollees per program/course.
- C. Support letters from partnering organizations detailing level and duration of program support.
- D. Pre- and post-testing methodology.
- E. Outreach and recruitment efforts.
- F. Potential for independent sustainability.
- G. Comprehensiveness of curriculum.
- H. Strategic plan with specific goals and measurable objectives.

#### 3. Deliverable requirements:

Applicants must submit deliverables by the dates specified in the Contract. Deliverables include but are not limited to:

- A. Student eligibility criteria and verification of procedures.
- B. Syllabus and course objectives.
- C. Names, ethnicities, and last four digits of participants' Social Security Number.
- D. Course attendance records.
- E. Pre- and post-testing results.
- F. Student evaluations of the program.
- G. Applicant's evaluation and analysis of the program.

4. Maximum funds available for this category: \$ 30,000.00  
Maximum funds per award: (Three (3) Awards) \$10,000.00

B. Community Service Programs

1. Category description:

Applicants will create a program that combines an overview of medical issues and health careers information with volunteerism in local health centers or community health projects. Participants will gain experience in healthcare settings after receiving information on local health issues and will also be informed on options for health careers that includes a synopsis of educational prerequisites, resources for grants and scholarships, and learning resource centers in their areas. Applications that stress a "grow your own" (i.e., recruit and train from within your own community) approach will be the most competitive.

2. Applications will be ranked in accordance with the following guidelines:

- A. Demographics (Do participants reflect local populations proportionately?)
- B. Minimum of 30 enrollees per program/course.
- C. Support letters from partnering organizations detailing level and duration of program support.
- D. Pre- and post-awareness survey of community health issues and health career options.
- E. Outreach and recruitment efforts.
- F. Potential for independent sustainability.
- G. Regional relevance of curriculum.
- H. Strategic plan with specific goals and measurable objectives.

3. Deliverable requirements:

In order to receive timely progress payments, applicants must submit deliverables by the dates specified in the Contract. Deliverables include but are not limited to:

- A. Student eligibility criteria and verification of procedures.
- B. Syllabus and course objectives.
- C. Names, ethnicities, and last four digits of participants' Social Security Number.
- D. Course attendance records.
- E. Pre- and post-testing results.
- F. Student evaluations of the program.
- G. Applicant's evaluation and analysis of the program.

4. Maximum funds available for this category: \$30,000.00  
Maximum funds per award: (Two (2) Awards) \$15,000.00

C. Health Career Conferences and Workshops

1. Category description:

Applicants will conduct a conference or workshop to acquaint students with one or more of the following: Medical, Dental, Public Health, Mental Health, and/or Allied Health professions. Topics of discussion to include: Overview of profession(s), academic application process, financial assistance opportunities, and career possibilities in one or more of these fields.

2. Applications will be ranked in accordance with the following guidelines:

- A. Demographics (Do participants reflect local populations proportionately?)
- B. Minimum of 50 enrollees per program/course.
- C. Support letters from partnering organizations detailing level and duration of program support.
- D. Outreach and recruitment efforts to underserved areas.
- E. Potential for independent sustainability.
- F. Regional relevance of conference or workshop.

3. Deliverable requirements

Applicants must submit deliverables by the dates specified in the Contract. Deliverables include but are not limited to:

- A. Student eligibility criteria and verification of procedures.
- B. Conference or workshop agenda.
- C. Names, ethnicities, and last four digits of participants' Social Security Number.
- D. Conference or workshop attendance records.
- E. Conference or workshop agenda.
- F. Participant evaluations of the conference or workshop.
- G. Applicant's evaluation and analysis of conference or workshop.

4. Maximum funds available for this category: \$30,000.00  
Maximum funds available per award: (Four (4) Awards) \$7,500.00

**D. Case Management for Students**

**1. Category description:**

Applicants will create a program to assess and fund the supportive services of students or programs lacking resources. Direct support in the form of vouchers for one-time course registration or tuition fees in remedial or prerequisite classes, course texts, or public transportation vouchers can be proposed. Support activities that focus on equipping students with the academic survival skills needed for completing health professional programs such as note taking, time management, and tutoring can also be proposed.

**2. Applications will be ranked in accordance with the following guidelines:**

- A. Demographics (Do participants reflect local populations proportionately?)
- B. Minimum of 30 enrollees per course/ program.
- C. Support letters from partnering organizations detailing level and duration of program support.
- D. Outreach and recruitment efforts to students/participants.
- E. Potential for independent sustainability.

**3. Deliverable requirements:**

Applicant must submit deliverables by the dates specified in the Contract. Deliverables include but are not limited to:

- A. Student eligibility criteria and verification of procedures.
- B. Syllabus and course objectives.
- C. Names, ethnicities, and last four digits of participants' Social Security Number.
- D. Course attendance records.
- E. Student evaluations of the program.
- F. Applicant's evaluation and analysis of the program.

4. Maximum funds available for this category: \$15,000.00  
Maximum funds per award: (Three (3) Awards) \$5,000.00

**7. Application Requirements**

- A. Applicants must provide evidence of successful interaction with economically/educationally disadvantaged students or demonstrate an understanding of diverse cultural values that can be readily translated into an effective program for Contract purposes.
- B. Applications submitted for State Contracts are normally accompanied by a Statement of Compliance in accordance with Title II, California Administrative Code 8113. The OSHPD has



included a compliance provision in the application forms in lieu of requiring applicants to use the Statement of Compliance form.

- C. Applicants will be required to conduct outreach and recruitment in designated underserved areas.
- D. Applicants will be required to recruit from stated disadvantaged groups (e.g., advertise course/conference with appropriate on-campus organizations). (See Page 3, Item 3, entitled Eligible Student Participants).
- E. Applicants for conference activities will secure conference sites and knowledgeable speakers, make audio-visual and other training aid arrangements, pay consultant fees to appropriate speakers, develop and reproduce conference materials, mail correspondence for conferences, tabulate conference evaluations, and do all other tasks required to conduct contracted activities.
- F. Applicants should review their proposed schedule of activities according to the reporting requirements to insure compatibility with the timeframes specified. Contractor must submit required deliverables at dates specified in the Contract, and adhere to the reporting schedule, regardless of the number of awards. Anticipating potential overlaps, conflicts, and scheduling proper reporting dates is the sole responsibility of the applicant.

## **8. Report Requirements**

- A. Reports and supporting documents, and any data collected during the funding period, shall become the property of the State. Use of the findings and recommendations, or conclusions of the report shall be at the sole discretion of OSHPD and can be reprinted at any time.
- B. Progress reports, as specified in the Contract, shall be submitted to OSHPD. These reports must be received within the timeline set forth in the Contract to receive timely progress payments and show evidence of recruitment of targeted groups (e.g., list of on-campus or community organizations sent course/conference flyers).

## **9. Contract Requirements**

- A. Progress payments will be made upon completion of required deliverable reports as specified in the Contract. Standard Agreements will have ten percent (10%) of payments withheld pending satisfactory completion by the applicant of all the terms and conditions required by the contract.
- B. There shall not be any activity on a Contract after its expiration date.
- C. Contractor request for a no-cost time extension must be made to OSHPD thirty (30) calendar days prior to the expiration of the contract. Written request must be faxed to OSHPD at (916) 654-3138 to the attention of Felicia M. Borges.

## **10. Mandatory Submission Requirements**

Failure to comply will deem the Application non-responsive.

- A. Applicants must submit (separately for each award category of interest) one (1) printed original and two (2) printed copies of their application package.

- B. Applicants must submit a complete application package that includes:
1. Cover letter.
  2. Table of contents.
  3. Contract Application packet (one [1] original and two [2] printed copies of complete set per award category).
    - a. Application forms: Pages 14 and 15 or exact computer template signed by appropriate personnel.
    - b. Summary: Page 16 or exact computer template.
    - c. Detailed budget: Pages 17 and 18 or exact computer template (one [1] original and two [2] printed copies of complete set per award category), submitted in a separately sealed envelope.
  4. Technical proposal: each award category bid by the applicant requires a separate technical proposal description.
  5. Refer to Page 25, Final Checklist, to ensure all proper documents are included.
- C. All applications **must** be sealed and received by OSHPD by **5:00 p.m on May 29, 2007** as stated in Item 14. Non-sealed bids may be rejected. The sealed application must clearly indicate **HWCDD/HCTP RFA 06-7013**, show your firm name and address, and be marked with **"MAILROOM DO NOT OPEN,"** as shown in the following example:

Felicia M. Borges, Program Coordinator  
Office of Statewide Health Planning and Development  
1600 9th Street, Room 440  
Sacramento, CA 95814

**HWCDD/HCTP RFA 06-7013**

**MAILROOM DO NOT OPEN**

## **11. Budget Requirements and Constraints**

Applicants must recognize that the basic emphasis of the HWCDD/HCTP contracting plan is to increase program activities, and therefore the participation of economically and/or educationally disadvantaged students in California's health professional schools. The contracting mechanism is designed to help meet the individual needs of students at various levels for their academic and career development.

The following constraints shall apply to all submitted applications:

- A. The State policy on this HWCDD/HCTP stipulates that the maximum assistance available for any single award category shall not exceed the amount of \$15,000.00.
- B. Funds are not to be used to supplement the salaries of existing full-time staff of the contracting organization, although release time may be used to free full-time staff for participation in program. If release time is being used for staff, it must be noted in the application.

- C. Funds are not to be used to supplement the salaries of existing full-time staff of the contracting organization, although release time may be used to free full-time staff for participation in program. If release time is being used for staff, it must be noted in the application.
- D. Funds can be used to hire consultants or sub-applicants for the delivery of Contract services. Fringe benefits for consultants and sub-applicants can be paid out of Contract monies.
- E. Funds cannot be used for out-of-state travel.
- F. Funds cannot be used to construct or renovate facilities or purchase equipment.
- G. Funds cannot be used for entertainment purposes.
- H. Funds must be spent within the term of the Contract.

## **12. Application and Evaluation Procedures**

Evaluation, scoring, and awards will be based on a two-phase, sealed envelope process. Application budget expenditures shall be submitted in a separate, sealed envelope and will not be opened until the Evaluation and Selection Committee (ESC) have determined that the application meets the criteria of the application request.

- A. In connection with selection guidelines, each contract will be evaluated in accordance with Federal Title V and VII policies, which refer to the following:

“No person shall, on the grounds of race, color, national origin, age or sex, be excluded from participation in, be denied the benefits of, or be subjected to discrimination under any program or activity receiving State financial assistance.”
- B. The ESC will review applications for the determination of award recommendations. The ESC may consist of OSHPD staff whose backgrounds are related to healthcare, education, or employment development.
- C. During application review, each application will be checked for the presence or absence of required information as specified in this RFA.
- D. Using established criteria, final selection(s) will be made by OSHPD program manager on the basis of which application(s) best meets OSHPD and HWCDD objectives. If, in the opinion of OSHPD, proposals contain false or misleading statements, or provide references which do not support an attribute or condition claimed, the application shall be rejected and withdrawn from the application process.
- E. The award(s) will go to the proposals with the most points that allow HWCDD/HPC to achieve its object, number, and geographic goals. Proposals must score at least 85 points to be considered for funding. In making its award, the evaluation and selection process will use the stated criteria on page 15 with their accompanying weights. Narrative shall not exceed six (6) pages.
- F. OSHPD retains the right to reject any or all applications. In this case, or if all funds are not awarded in a specific award category, funds may be diverted to other award categories.

### 13. Application and Evaluation Criteria

Statement of problem:	10 points maximum
<ul style="list-style-type: none"><li>• Proposal conforms to application instructions and guidelines</li><li>• Clearly identifies number and types of students to be served</li><li>• Proposal consistent with needs of economically/educationally disadvantaged students</li></ul>	
Technical approach/proposed training:	20 points maximum
<ul style="list-style-type: none"><li>• Clearly describes proposed activities</li><li>• Outreach efforts/groups are described and examples are attached</li><li>• Reasonable and feasible proposal approach</li><li>• Activities are consistent with applicant's organization's goals</li></ul>	
Management plan:	20 points maximum
<ul style="list-style-type: none"><li>• Appropriate budget for plan</li><li>• Timely schedule of activities</li><li>• Clearly described monitoring procedures</li></ul>	
Evaluation:	15 points maximum
<ul style="list-style-type: none"><li>• Defined evaluation plan for each proposal activity</li></ul>	
Project personnel:	10 points maximum
<ul style="list-style-type: none"><li>• Design of lead personnel and manpower-time distribution</li><li>• Personnel qualifications and diversity of backgrounds</li></ul>	
Applicant qualifications:	15 points maximum
<ul style="list-style-type: none"><li>• Experience with student health profession issues</li><li>• Samples of similar work</li><li>• Organizational resources</li></ul>	
Facilities:	10 points maximum
<ul style="list-style-type: none"><li>• Location of activities</li><li>• Clear identification of administrative facilities</li></ul>	
Total Possible Score:	100 points maximum

### 14. Management Plan

Date and Time Schedule:	
RFA Release	April 4, 2007
RFA Submission Deadline	May 29, 2007 5:00 p.m.
RFA Opening/Evaluations	May 30-31, 2007
Notice of Intent to Award	June 1, 2007

Last Date to Protest the Award	June 7, 2007 5:00 p.m.
Protest Resolution by	June 15, 2007
Proposed Start Date of Contract	June 24, 2007
Progress Reports Due From Contractor	November 16, 2007
Final Reports Due From Contractor	May 23, 2008
Final Date of Contract	June 30, 2008

#### **15. Protest**

Protests stating the reason, law or rule, regulation, or practice in regard to the evaluation or awarding of contracts or other aspects of the selection process must be delivered to the address in Item 10.

Protests shall be limited to the following grounds:

- The department failed to correctly apply the standards for reviewing format requirements or evaluating the application as specified in the RFA.

#### **16. Specific Changes/Amendments in Contract**

During the course of these Contracts, OSHPD must approve any changes which, in the sole judgment of OSHPD, will enhance the results of the Contract. Changes must be made by a written Amendment to the Contract. Extensions to the schedule for submission of required reports must be approved by OSHPD and completed using the formal Amendment process. Requests for extensions must be submitted in writing and detail the reasons for the delay. Amendments cannot be made to a Contract after its expiration date. Any extension request made by the Contractor must be made to OSHPD 30 calendar days prior to the expiration date. Written request must be faxed to OSHPD at (916) 654-3138 to the attention of Felicia M. Borges.

#### **17. Disposition of Applications**

All materials submitted in response to the RFA will become the property of the State and subject to the Public Records Act.

Following the evaluation and selection process, a Contract will be prepared between the individual or organization selected and OSHPD, based upon the organization's technical and business submissions, and any other criteria contained in the RFA.

**APPLICATION**

1. Program Award Category \_\_\_\_\_
2. Applicant Organization  
(name and address) \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_
3. Program Director  
A. Name \_\_\_\_\_  
B. Mailing address \_\_\_\_\_  
C. Highest Degree \_\_\_\_\_  
D. Position Title \_\_\_\_\_  
E. Department \_\_\_\_\_  
F. Major Subdivision \_\_\_\_\_  
G. Telephone \_\_\_\_\_  
H. E-Mail Address \_\_\_\_\_
4. Contract Coordinator  
A. Name \_\_\_\_\_  
B. Mailing Address \_\_\_\_\_  
\_\_\_\_\_  
C. Telephone \_\_\_\_\_  
D. E-Mail Address \_\_\_\_\_
5. Types of student population (check as applicable)  
High School \_\_\_\_\_ Undergraduate \_\_\_\_\_ Medical \_\_\_\_\_ Nursing \_\_\_\_\_  
Allied Health \_\_\_\_\_ Graduate \_\_\_\_\_ Dental \_\_\_\_\_ Public Health \_\_\_\_\_  
Other \_\_\_\_\_

6. Previous Federal or State funding

State of California \_\_\_\_\_ Year \_\_\_\_\_ Award Amount \_\_\_\_\_

Federal Programs \_\_\_\_\_ Year \_\_\_\_\_ Award Amount \_\_\_\_\_

7. Federal Employer Identification Number (FEIN) \_\_\_\_\_

8. Type of organization: Private Nonprofit ☐ Private Profit ☐ Public ☐

9. Official authorized to sign for applicant organization

\_\_\_\_\_  
(Print or type name, title, and telephone number)

10. Program Director assurance:

I agree to accept responsibility for the completion of the project and to submit the required progress reports if an award is made as a result of this application.

Signature of authorized person identified in Item 3.a.

\_\_\_\_\_

Date: \_\_\_\_\_

11. Certification and acceptance:

Statement of Compliance:

The prospective applicant's signature affixed hereon and dated shall constitute a certification, under the penalty of perjury under the laws of the State of California, that the applicant has, unless exempted, complied with the nondiscrimination program requirements of Government Code Section 12990 (a - f) and of Title 2, California Code of Regulations, Section 8113. See State Contracting Manual, Chapter 4.

Signature of authorized person identified in Item 9.

\_\_\_\_\_

Date: \_\_\_\_\_

Title: \_\_\_\_\_

A. Summary of award category application:

B. Purpose and program objectives:

C. Types of students:

D. Facilities:

E. Schedule:



**Budget - Proposed Expenses:**

1. Personnel Contributions		
Name/title of position	Time/Effort	Salary (Value)Total
	Subtotals:	\$

2. Consultant Costs			
Name/title of position	Time/Rate	Travel/Per diem	Compensation Total
Subtotals			
	Consultant Total		\$

3. Equipment: (Itemize presentation materials or training equipment to be used, leased, or time-leased for the activities).

4. Supplies: (Itemize by Category)

5. Staff Travel

6. Other Expenses (Itemize)

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Total cost/value of Categories one (1) and two (2) \$ \_\_\_\_\_

Total of Categories three (3) through six (6) \$ \_\_\_\_\_

Direct cost of entire proposed project period (Categories one (1) through six (6)) \$ \_\_\_\_\_

### **Application Instructions**

1. Program Award Category

Identify the funding category you are applying for: Academic Preparation and Support, Community Service Programs, Health Career Conferences and Workshops, or Case Management for Students.

2. Applicant Organization

Name and address of the one institution that will be financially accountable for the use and disposition of any funds awarded on the basis of this application. Enter the name, address, street, city, state, and zip code.

3. Program Director

A. Name: Designate the individual who will direct and be responsible to the applicant institution for the proposed program.

B. Mailing Address: Enter the office street address of the program director.

C. Highest Degree: Highest earned degree (i.e., BS, MS, PhD).

D. Position Title: Program Director or Equivalent.

E. Department: Show department, service, laboratory, or equivalent.

F. Major subdivision: If indicated within organizational structure.

G. Telephone: Enter the number at which the Program Director can be reached during business hours.

H. E-Mail Address: Enter the E-Mail Address at which the Program Director can be reached during business hours.

4. Contract Coordinator

A. Name: Designate the individual who will be the contact person for the institution's contract department.

B. Mailing Address: Enter the office street address of the contract office.

C. Telephone: Enter the number at which the contact person can be reached during regular business hours.

D. E-Mail Address: Enter the E-Mail Address at which the contact person can be reached during regular business hours.

5. Types of student population: Check appropriate boxes.

6. Previous federal or state funding: Indicate agency and amount.

7. Entity identification number: Enter IRS employer number.

8. Type of organization: Check one.

9. Official authorized to sign for applicant organization: Print or type name, title, and telephone number of authorized official.
10. Program Director assurance: To be signed by designated program director or equivalent.
11. Certification and acceptance: The signature of an authorized official of the applicant organization is required as certification that the information in the application is correct.

A. Summary of award category application

The summary must not exceed one (1) page. More detailed information should be included in the proposal description in the application body. This summary provides a preview to reviewers as to program content. As such, it is essential that the brief summary capture the essence and individual character of each program. This summary should cover the elements below:

B. Purpose and program objectives

Describe the purpose and major features of the proposed program. Include program area(s), discipline(s), procedures, and methods to be used.

C. Types of students

Include number of students, ethnicity, education, background experience required, and the criteria used in their selection.

D. Facilities

Identify and briefly describe the primary facility as well as other sites to be utilized by the program.

E. Schedule

Identify the schedule of activities that will be provided through the proposed program during the term of the agreement, anticipated to be June 24, 2007 through June 30, 2008.

### **Budget Instructions**

List the direct and indirect costs requested for the contact budget period. Additional details may be provided in the Budget Justification block.

#### **Proposed Expenses**

1. Personnel

List the total program effort of hours or percent of time that personnel (including paid and unpaid) will devote to the program; reflect their contribution in the budget justification even though funds for salaries have not been requested. Information on both grant and non-grant supported positions is essential to determine if program resources are adequate.

## 2. Consultant Costs

Give name and institutional affiliation of each consultant, if known, and indicate the name and extent of the consultant service to be performed. Include expected rate of compensation and total fees, travel, per diem, or other related costs for each consultant.

## 3. Equipment

Contract funds are not designed for purchase of major office equipment. Funds can be used for presentation materials and other training items directly used in the contracted informational or developmental activities.

## 4. Supplies

Miscellaneous office supplies costing less than fifty dollars (\$50) should be grouped together and not itemized. If you are requesting funds to purchase routine supplies commonly found in offices, explain the need for duplication (i.e., how they will be specifically used for the proposed program). Itemization and justification, as to how major types of supplies relate to the training program, is required for all items or supplies purchased with grant funds. Medical/clinical supplies and drugs are not ordinarily acceptable for funding unless used for demonstration or training purposes.

## 5. Staff Travel

Enter amount for staff travel essential to conduct the training program. Describe the purpose of the travel and provide the number of individuals for whom funds are requested. Foreign or out-of-state travel is not an allowable cost. Travel costs for consultants should be included under Item 2, Consultant Costs.

## 6. Other Expenses

List and justify other expenses by major categories, such as publishing, mailing costs, room rentals, etc., that do not fit into other categories.

Direct cost: Total amount of direct expenses required for award category.

Total cost: Total amount of expenses for award category application.

**Technical Proposal (Narrative – Not to exceed six (6) pages)**

1. Background/Statement of Problem
  - A. Provide relevant background history, and state problem to be resolved.
  - B. Follow all RFA guidelines and instructions.
  - C. Describe how proposal meets HWCDD/HCTP objectives described on Page 3.
  - D. Identify other current or previous sources of fiscal support related to economically/educationally disadvantaged health professions development.
2. Technical Approach/Proposed Training
  - A. Objectives
    1. State specific objectives and activities to be accomplished through support of the proposed program.
    2. Discuss related secondary objectives and activities.
  - B. Rationale
    1. Discuss the reasons for assuming that the proposed program activities will achieve the stated objectives.
    2. Discuss how these objectives and activities fulfill category requirements.
3. Methodology
  - A. Describe the specific methods or techniques to be used in achieving the objectives. This section should include a description of:
    1. Who will conduct the program?
    2. How will the program be conducted?
    3. Where will the program be conducted?
    4. When will the program be conducted?
    5. Who will participate in the program?
  - B. Discuss the Target Student Population
  - C. The application should describe the criteria and methodology for selecting those individuals with a potential for education or training in the health professions who come from a disadvantaged background. Provide the number and types of individuals to be aided by the proposed program, (for example – low-income, gender, educational level, and targeted health professions).
  - D. Proposed and/or existing program relationships to the admission and retention activities of health profession schools that result in increased student enrollment and decreased student attrition.

4. Support Data

Discuss factors which may have a specific impact on the proposed project in terms of the following:

- A. If an educational institution is the applicant, provide enrollment data of the proposed target population by school year as compared to total enrollment for the three (3) previous years.
- B. Previous institutional commitment in the proposed program area (track record). A brief description of projects completed and/or underway at the institution or agency which may demonstrate a commitment, experience, or resource that can be applied to conduct the proposed program.
- C. Evidence that the applicant has had prior experience in economically/educationally disadvantaged health workforce development activities or has demonstrated an understanding of diverse values.
- D. A narrative description of program accomplishments during the current project, including quantifiable data regarding students affected such as numbers tutored, admitted to professional school etc.
- E. Identify any significant program changes that may have occurred or that are anticipated.

5. Management plan

- A. Indicate the administrative unit that will be responsible for the program. Describe any operational agreements (collaborative efforts) among the components of the educational program that are necessary to achieve the stated objectives.
- B. Discuss the implementation schedule, detailing the timing of events in relation to the long range plan.

6. Evaluation

- A. Describe the methods that will be used to measure the effectiveness of each program objective that supports the overall goal.
- B. Specify criteria for determining outcomes.
- C. Specify qualitative and/or quantitative evaluation measures proposed for program activities and student performance.
- D. List types of data collected and methods of data collection and analysis.
- E. Describe any tracking system that may be implemented for gathering a continuum of data on student participants. This may include such variables as number and characteristics of students participating in each program component and their subsequent progress as they apply, are accepted into, enroll, and graduate from a health professions school.

7. Personnel

- A. Discuss the use of personnel.
- B. Specify whether the program staff is representative of the population to be served by the proposed program.

- C. Level of program involvement by health professionals from diverse backgrounds.
- D. Release time may be used to free a full-time staff for participation in program. If release time is to be used, it must be clearly stated in this section of the proposal.

8. Qualifications of Applicant

- A. Identify and provide evidence of any previous educationally/economically disadvantaged health professional development activities.
- B. Identify resources that will be used to implement activities.

9. Facilities

- A. Discuss the appropriateness of the training facilities.
- B. Indicate how the location meets the objectives of the selected award category.

10. Financial Plan

Provide specific indicators to the extent and means by which your program plans to become self-sufficient after OSHPD grant support ends. This should include sources and nature of income, future funding initiatives and strategies, and timetables for becoming self-sufficient.



### **Final Checklist**

Each application must include the following:

- ☐ Cover letter
- ☐ Table of contents
- ☐ Five-page application packet for each category for which you have applied
  - Application form: Pages 14-15, or exact computer template, signed by appropriate personnel.
  - Summary: Page 16 or exact computer template. Limited to space provided.
  - Budget: Pages 17-18, or exact computer template.
- ☐ Technical proposal not exceeding six (6) pages in length. A separate technical proposal description must be submitted for each award category for which you are submitting an application.